| - | | | | Application or Docket Number | | | | |
|---|-------------------------------------|--------------------------------|-------------|------------------------------|----|------------------|------------------------|--|
| PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003 (0/626/08) | | | | | | | | |
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | ENTITY | OR | OTHER SMALL | | |
| TOTAL CLAIMS | וז | | RAT | E FEE | 7 | RATE | FEE | |
| FOR : | NUMBER FILED NUMBER EXTRA | | BASIC | FEE 375.00 | OR | BASIC FEE | 750.00 | |
| TOTAL CHARGEABLE CLAIMS | [] minus 20= * | | X\$ 9 |) = | OR | X\$18= | | |
| INDEPENDENT CLAIMS | (minus 3 = ") | | X42 | 3 . | OR | -X84= | 252 | |
| MULTIPLE DERENDENT CLAIM PRESENT | | | +140 | _ | ОЯ | | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | TOT | | OR | | 1007 | |
| OTHER THAN | | | | | | | | |
| (Column 2) (Column 3) | | | | LL ENTITY | OR | SMALL | ENTITY | |
| CLAMS REMAINING AFTER AMENDMENT Total Independent | PIGHE NUMBI PREVIOL PAID F | ER PRESENT JSLY EXTRA | RAT | ADDI- E TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| Total • 17 | Minus - 9 | 0 = / | X\$ 9 | - | OR | X\$18= | | |
| Independent • 6 | Minus and (| 2 | . X42 | | OR | X84= | · | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | _ | OR | +280= | | |
| 1. 1 -11 -11 -14 1 | 1 | | | /L | OR | TOTAL | | |
| ADDIT. FEEON ADDIT. FEE | | | | | | | | |
| CLAIMS REMAINING AFTER AMENDMENT Total Independent Total Independent | HIGHE NUMBI PREVIOL PAID F | ST ER PRESENT ISLY EXTRA | RAT | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| Total • M | | ml-/ | X\$ 9 | - | OR | X\$18= | | |
| Independent • FIRST PRESENTATION OF M | Minus | = / | X42 | • | OR | X84=/ | | |
| | | | | | OR | +280= | | |
| | | | TO ADDIT. F | | OR | TOTAL ADDIT. FEE | | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | |
| CLAIMS REMAINING AFTER AMENOMENT Total Independent Total | HIGHE NUMBI PREVIOL PAID F | ER PRESENT JSLY EXTRA | RATI | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| Total + | Minus + | a | X\$ 9 | - · | OR | X\$18= | | |
| Independent • | Minus *** | | X42 | | OR | X84= | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | 1 | +280= | | |
| • If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | OR | TOTAL | | |
| ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT, FEE | | | | | | | <u> </u> | |
| The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1: | | | | | | | | |